

## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No. (Optional)

29025.0001



In re Application of Arlene RAMSINGH, et al.

Application Number  
09/879,572Filed  
June 12, 2001For: COXSACKIEVIRUS B4 EXPRESSION VECTORS AND USES  
THEREOF

Art Unit 1648

Examiner Stacey Chen

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |                                     |                                  |           |
|-------------------------------------|----------------------------------|-----------|
| <input checked="" type="checkbox"/> | One month (37 CFR 1.17(a)(1))    | \$ 120.00 |
| <input type="checkbox"/>            | Two months (37 CFR 1.17(a)(2))   | \$        |
| <input type="checkbox"/>            | Three months (37 CFR 1.17(a)(3)) | \$        |
| <input type="checkbox"/>            | Four months (37 CFR 1.17(a)(4))  | \$        |
| <input type="checkbox"/>            | Five months (37 CFR 1.17(a)(5))  | \$        |

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 60.00

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0911

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record. Registration Number

☒ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) 33,949

May 26, 2005

Date

(202) 496-7845

Telephone Number

Signature

Shmuel Livnat

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☒ Total of 1 forms are submitted.

05/27/2005 JADD01 00000099 500911 09879572

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